FILE	NOW: FIL	ING FEE A	FTER MAY 1	IS \$22	25.	.00			-	
PROFIT CORPORATION ANNUAL REPORT 1996			FLORIDA DEF Sand Secr	PARTMENT ra B Mortha etary of Stat	ARTMENT OF STATE. B Mortham					
		V42128	3 (1)							
•	RETH'S, INC.			•						
							T ABON BILLEN ALBERT HEAD HAD			Aan alamanan
Principal Place	of Business		Mailing Address							
789 NW 37TH AVE MIAMI FL 33125			789 NW 37TH AVE MIAMI FL 33125							
							3. Date Incorporated or Qualifie 06/09/1992	1 3a. Da	of Last 05/01/	
2. Principal Plas	ne of Business		2a. Mailing Address				4. FEI Number	-	00,01,	Applied For
Suite, Apt. #	, etc.		Suite, Apt. #, etc.				65-0337941 5. Certificate of Status Desired		\$8.7	Not Applicable 5 Additional
Crty & State	····	:	City & State				Gentilicate of Status Desired G. Election Campaign Financing		Fee	Required
23 Zip			28]				Trust Fund Contribution		Adde	00 May Be ed to Fees
2.10	25 Cou	· .	Ζιρ 29	30 Cou	ntry		8. This corporation has liability for Florida Statutes	or intangible es □ No	tax under s	199.032,
	9. Name and Ad	dress of Current Re	gistered Agent				10. Name and Address of New		Agent	
NAZAR	ETH, DENIS L.				81	Name				
789 NV	V 37TH AVE					Street Add	ress (P.O. Box Number is Not Accept	able)		
MIAMI I	FL 33125				83					
						City		FI		ip Code
familiar with SIGNATURE	, and accept the obl	he State of Florida Signations of, Section 6	07.0505, Florida Statute स्टाइड्डॉडिंग (स्ट	S Ott Registeria	Спроп	andi S doa	ration submits this statement for the prod of directors. Thereby accept the ap	pointment a	s registered	d agent. I am
TITLE	DP		DELETE	13.	LE		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO Change	DRS IN 12 Addition
NAME STREET ADDRESS	NAZARETH, [19900 NW 37			12 NAS 13 STE		DORESS				
CHTY-ST-ZIP TITLE	MIAMI FL		D DELET	1.4 CIT		ZIP	w ·			
NAME			☐ DELETE	2 1 TIT 2 2 NAM					Change	Addition
STREET ADDRESS				2 3 S1H		DDAESS				
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	2.4 C-T		ZiP				prog 4
NAME				3 2 NAM	-				Change	Addition
STREET ADDRESS CITY-S1-Z-P				33 \$1						
I'TLE			☐ DELFIE	3.4 CHY 4. 1 TP		ZIP			Change	Addition
NAME				4.2 NAV	Æ.					C Madeon
STREET ADDRESS CITY+ST-ZIP				4.3 STR		- 1				
IIITE		······································	☐ DELETE	4 4 CH1		(IF			Change	Addition
NAME STREET ADDRESS				5.2 NAM					-	
CITY-ST-ZIP				5 3 STAI 5 4 CITY		į.				
TILE			☐ DELETE	6 1 TiTL					Change	Addition
TREET ADDRESS				6 2 NAM						
CHTY - ST - ZIP				6 3 STRE 6 4 CITY	. ST. 7	710				
 I do hereby c certify that th 	ertify that the inform e information indical	iation supplied with the	ns filing is voluntarily furn port or supplemental annu	ished and de	oes n	ot qualify fo	or the exemption stated in Section 119 te and that my signature shall have the	.07(3)(k), Fk	rida Statut	es. I further
oath: that I ai appears in Bl	m an officer or direct lock 12 or Plo ck 13	tor of the corporation if chapged, on on an	or the receiver or trustee attachment with an addi	enipowere ess	d to	execute this	e and that my signature shall have the report as required by Chapter 607, F	lorida Statul	enect as it es, and tha	made under It my name
SIGNATU	1 100	n Ngar F	h				4/22/4	. ,	Dr. 0	4/021
			ED NAME OF SIGNING OFFICE	R OR DIRECTO	R		· · · · · · · · · · · · · · · · · · ·	ر <u>-</u>	aytine Phone (4/03/6

SIGNATURE: